MALLA REDDY VISHWAVIDYAPEETH
(Deemed to be University)
Hyderabad

School of Nursing Science and Technology

FELLOWSHIP IN
TELE-HEALTH AND DIGITAL HEALTH 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 Nursing – School of Nursing Sciences & Technology	
2	Academic Council	
3	Executive Council	

Contents

1. Preamble and Need for the Programme .....
2. Vision, Mission and Programme Objectives .....
3. Programme at a Glance .....
4. Eligibility, Selection and Governance .....
5. Programme Outcomes .....
6. Curriculum Framework .....
7. Detailed Syllabus: Tele-health and Digital Health Nursing .....
8. Clinical Practice: Postings (840 hours) .....
9. Essential Telehealth Skills and Logbook .....
10. Scheme of Assessment .....
11. Infrastructure, Faculty and Quality Assurance .....
12. Suggested References .....
Annexure A: Final Assessment Sheet – MRV Fellowship .....
Annexure B: Logbook Formats .....
Annexure C: Certificate of Completion (format) .....

1. Preamble and Need for the Programme

Malla Reddy School of Nursing Science and Technology recognises digital health as a critical component of modern healthcare, particularly in the context of rapid technological advancements within healthcare systems across India. The integration of clinical practice with information and communication technologies enables nurses to enhance the quality, safety and efficiency of nursing care through digital tools and health information systems.

The Fellowship in Tele-health and Digital Health Nursing is designed to strengthen nurses' competencies in telehealth service delivery, electronic health records, remote patient monitoring, virtual consultations, mobile health applications, health informatics, digital documentation, data privacy and ethical practice. Through structured theory, simulation-based learning and supervised practical training, fellows will develop the knowledge, skills and professional judgement required for technology-enabled, patient-centred nursing care.

1.1 Need

- Digital-first and hybrid models of care require nurses who can safely support virtual consultations and continuity of care.
- Electronic health records, remote monitoring and mobile health tools are increasingly used for chronic disease management, health promotion and follow-up.
- Nurses need practical training in digital documentation, information standards, patient confidentiality, cyber security and applicable telemedicine guidance.
- Structured training can strengthen digital communication, patient engagement, evidence-based practice and quality improvement.

2. Vision, Mission and Programme Objectives

2.1 Vision

To prepare digitally competent nurses who deliver safe, accessible, ethical and evidence-based care through telehealth and digital health systems.

2.2 Mission

- Provide competency-based education through contact classes, simulation, supervised practical training and guided reflection.
- Promote safe, confidential, inclusive and patient-centred use of digital health technologies.
- Develop communication, data management, clinical judgement and quality-improvement skills for digital care.

2.3 Programme objectives

After successful completion of the Fellowship in Tele-health and Digital Health Nursing, the fellow will be able to:

1. Develop foundational knowledge of telehealth, digital health technologies and nursing informatics relevant to healthcare delivery in India.
2. Use electronic health records (EHR), telemedicine platforms and mobile health applications for appropriate nursing activities.
3. Apply remote patient monitoring, virtual consultation support and digital documentation to promote continuity of care
4. Maintain patient privacy, confidentiality, information security, informed consent and professional boundaries in digital practice.

5. Communicate effectively with patients, families and multidisciplinary teams through digital platforms.
6. Use digital health tools to support evidence-based practice, quality improvement, data analysis and nursing research.

3. Programme at a Glance

Item	Details
Name of the programme	Fellowship in Tele-health and Digital Health 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 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 relevant teaching or clinical experience.
- Clinical preceptors: registered nurses or digital health professionals with relevant experience in the assigned clinical or informatics setting.

- 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	Explain key concepts, applications, opportunities and limitations of telehealth, digital health and nursing informatics.
PO2	Telehealth practice	Support virtual consultations, remote triage, follow-up and patient education within nursing scope and institutional protocols.
PO3	Digital documentation	Use EHR / EMR and relevant health information systems accurately under supervision.
PO4	Remote monitoring	Collect, review and communicate remote patient-monitoring data and escalate concerning findings appropriately.
PO5	Safety, ethics and law	Apply consent, confidentiality, privacy, cyber security and applicable professional and regulatory requirements.
PO6	Communication and quality	Communicate clearly through digital channels and use data, evidence and feedback for quality improvement.

6. Curriculum Framework

6.1 Distribution of hours

Unit	Title	Theory (h)	Simulation lab (h)
1	Foundations of Digital Health	20	12
2	Telehealth and Telenursing Operations	20	14
3	Health Informatics and Data Management	20	12
4	Emerging Technologies in Nursing	20	10
5	Legal, Ethical and Quality Standards	20	12
	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, digital safety and confidentiality, baseline skills assessment, Units I and II; introduction to EHR and telehealth platforms.
3–20	Supervised practical postings in telehealth services, outpatient / chronic-care follow-up, health informatics and digital documentation; theory and simulation aligned with postings.
21–25	Remaining postings, logbook completion, revision and case-scenario practice
26	Final assessment and exit examination

6.3 Teaching–learning methods

- Interactive lectures, videos and case-based learning
- Demonstrations and supervised practice with telehealth platforms, EHR / EMR and mobile health applications.

- Workshops on data entry, coding concepts, privacy, cyber security and quality assurance.
- Role-play for virtual consultations, patient education, remote triage and structured handover.
- Case discussions, reflective journals, small projects and logbook review.

7. Detailed Syllabus: Tele-health and Digital Health 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: Foundations of Digital Health

Theory 20 hours · Simulation laboratory 12 hours

Learning objectives

- Understand the evolution, scope and principles of digital health.
- Describe the digital health ecosystem and major national and global initiatives.

Content

Introduction to digital health

- Historical review and evolution of digital health and healthcare technology.
- Concepts, definitions, principles and scope of digital health.
- Importance of digital health in contemporary healthcare delivery.
- Differences between digital health, e-health, m-health, telehealth and telemedicine.
- Role of nurses in digital health services.

Digital healthcare ecosystem

- Components of the digital healthcare ecosystem.
- Integration of healthcare providers, patients, hospitals, community services and digital platforms.
- Digital health applications in primary, secondary and tertiary healthcare.
- Applications of digital health in health promotion, disease prevention, diagnosis, treatment, rehabilitation and follow-up.
- Opportunities and challenges in digital healthcare delivery.

National and global digital health initiatives

- Overview of national digital health initiatives and digital health infrastructure in India.
- Ayushman Bharat Digital Mission (ABDM) and its components.
- Digital health records and health information exchange.
- Overview of global digital health strategies and initiatives.
- Role of nurses in implementing and promoting digital health programmes.

Digital health implementation in nursing practice

- Applications of digital tools in nursing education, clinical practice, administration and research.
- Digital documentation and electronic nursing records.
- Benefits, limitations and barriers to the adoption of digital health.
- Digital literacy and competency requirements for nurses.
- Patient-centred and technology-enabled nursing care.

Teaching–learning activities

Lectures, videos, group discussion, case-based discussion on digital health applications in nursing practice.

Assessment methods

MCQ; Case Presentation; Log book evaluation & viva

Course outcomes (CO)

CO	Course outcome: the fellow will be able to
CO1	Describe the evolution, concepts, principles and scope of digital health.
CO2	Explain the components and functioning of the digital healthcare ecosystem.
CO3	Identify national and global digital health initiatives relevant to nursing practice.
CO4	Discuss the applications, benefits, challenges and limitations of digital health in healthcare delivery.

Unit II: TELEHEALTH AND TELENURSING OPERATIONS

Theory 20 hours · Simulation laboratory 14 hours

Learning objectives

- Explain telenursing principles, roles and professional etiquette.
- Demonstrate basic workflows for virtual consultations and remote monitoring.

Content

Introduction to telehealth and telenursing

- Concepts, definitions, principles and scope of telehealth, telemedicine and telenursing.
- Evolution and development of telehealth services.
- Differences between synchronous and asynchronous telehealth.
- Types and models of telehealth service delivery.
- Advantages, limitations and barriers to telehealth implementation.
- Roles, responsibilities and competencies of the telenursing.

Telehealth consultation and communication

- Preparation for a virtual consultation.
- Patient identification and verification before consultation.
- Establishing rapport and maintaining professional communication remotely.
- Obtaining patient history and conducting remote nursing assessment.
- Use of audio, video and digital communication platforms.
- Patient education, counselling and health guidance through telehealth.

Remote patient monitoring

- Concepts and principles of remote patient monitoring.
- Use of digital devices to monitor vital signs and health parameters.
- Remote monitoring of blood pressure, blood glucose, oxygen saturation, pulse and temperature.
- Patient instruction regarding the correct use of monitoring devices.
- Follow-up and continuity of care through remote monitoring.

Mobile health and digital patient support

- Concepts and applications of mobile health (mHealth).
- Use of mobile applications, SMS, digital reminders and patient portals.
- Digital health education and self-management support.
- Remote support for patients with chronic diseases.
- Telehealth applications in maternal and child health, elderly care and community health.
- Mobile health and digital patient support

Remote triage and care coordination

- Principles of remote nursing triage.
- Collection of symptoms and assessment of urgency through telehealth.

- Identification of red-flag symptoms requiring immediate referral.
- Prioritisation of patients based on clinical urgency.
- Coordination with physicians, hospitals, laboratories and community health services.

Teaching–learning activities

Lectures, role play, simulation, hands-on practice, case scenarios, demonstration.

Assessment methods

MCQs, Case presentation; role-play, viva, logbook assessment

Course outcomes (CO)

CO	Course outcome: the fellow will be able to
CO1	Explain the concepts, principles, models and scope of telehealth and telenursing.
CO2	Conduct a structured virtual nursing consultation under appropriate supervision.
CO3	Demonstrate the use of remote monitoring devices and communicate relevant patient data.
CO4	Apply principles of remote triage, referral and escalation of care in simulated or supervised settings.

Unit III: Health Informatics and Data Management

Theory 20 hours · Simulation laboratory 12 hours

Learning objectives

- Describe common health information systems and data standards.
- Use digital records and data-entry workflows accurately under supervision.

Content

Introduction to health informatics

- Concepts, definitions, principles and scope of health informatics.
- Importance of health informatics in nursing practice and healthcare delivery.
- Relationship between health informatics, nursing informatics and digital health.
- Role of nurses in collecting, recording, retrieving and using health information.

Electronic health records and hospital information systems

- Concepts and components of electronic health records (EHR) and electronic medical records (EMR).
- Difference between electronic medical records and electronic health records.
- Hospital Management Information Systems (HMIS).
- Laboratory Information Management Systems (LIMS).
- Picture Archiving and Communication Systems (PACS).
- Digital nursing documentation and electronic patient charts.

Health data standards and interoperability

- Concepts and importance of standardised health information.
- Meaning and importance of interoperability in healthcare.
- Health Level Seven (HL7) standards.
- International Classification of Diseases (ICD-10 and ICD-11).
- Systematised Nomenclature of Medicine—Clinical Terms (SNOMED CT).
- Standardisation of clinical terminology and nursing documentation.
- Health information exchange between healthcare facilities and digital platforms.

Health data management and quality

- Types and sources of healthcare data.
- Data collection, entry, validation, storage, retrieval and maintenance.
- Principles of data accuracy, completeness, consistency, timeliness and reliability.

- Identification and correction of incomplete, duplicate or inaccurate records.
- Data quality assurance in electronic health records.

Data analytics in healthcare

- Introduction to healthcare data analytics.
- Descriptive and basic predictive analytics in healthcare.
- Use of dashboards, reports, graphs and indicators.
- Interpretation of patient trends and clinical indicators.
- Use of healthcare data in monitoring disease patterns and service utilisation.
- Applications of analytics in nursing quality improvement and patient safety.

Teaching–learning activities

Lectures; demonstrations, hands-on practice, exercises in digital nursing documentation; case-based exercises on data quality;

Assessment methods

MCQs, health record review; data quality audit; case-based assignment

Course outcomes (CO)

CO	Course outcome: the fellow will be able to
CO1	Explain the concepts, principles and applications of health informatics in nursing practice.
CO2	Identify the functions of EHR, EMR, HMIS, LIMS and PACS in healthcare delivery.
CO3	Demonstrate accurate and complete electronic nursing documentation in a simulated or supervised setting.

Unit IV: Emerging Technologies In Nursing

Theory 20 hours · Simulation laboratory 10 hours

Learning objectives

- Describe emerging digital technologies and their potential nursing applications.
- Evaluate benefits, risks and limits of technology-assisted care.

Content

Introduction to emerging healthcare technologies

- Overview of emerging technologies in healthcare and nursing.
- Role of technological innovation in improving access, efficiency, safety and quality of care.
- Applications and limitations of technology-enabled nursing practice.

Artificial intelligence and machine learning in healthcare

- Concepts and basic principles of artificial intelligence (AI) and machine learning (ML).
- Differences between artificial intelligence, machine learning and conventional computer-based systems.
- Applications of AI in clinical decision support, risk prediction and patient monitoring.
- Use of AI-enabled tools in symptom assessment, screening and prioritisation.

Internet of Things and wearable healthcare devices

- Concepts and principles of the Internet of Things (IoT) in healthcare.
- Introduction to connected healthcare devices and sensors.
- Wearable devices for monitoring activity, pulse, sleep and other health parameters.
- Connected devices for remote monitoring of vital signs.
- Integration of device-generated data with digital health platforms.

Tele-robotics and technology-assisted care

- Introduction to robotics and tele-robotics in healthcare.
- Applications of robotic technologies in selected clinical and surgical settings.

- Role of nurses in technology-assisted procedures and patient support.
- Remote specialist assistance and technology-enabled clinical collaboration.
- Safety precautions and monitoring during the use of robotic systems.

Augmented reality and virtual reality

- Basic concepts of augmented reality (AR) and virtual reality (VR).
- Differences between AR and VR.
- Applications in nursing education, clinical simulation and skills training.
- Use of immersive technology for patient education and procedural preparation.
- Virtual simulation for clinical decision-making and emergency response training.
- Advantages and limitations of AR/VR-based learning.

Teaching–learning activities

Lectures; videos and demonstrations

Assessment methods

MCQs; technology demonstration; case-based analysis of AI-supported clinical decision-making;

Course outcomes (CO)

CO	Course outcome: the fellow will be able to
CO1	Explain the basic concepts and applications of AI, machine learning, IoT, wearable devices, tele-robotics, AR and VR in healthcare.
CO2	Identify suitable emerging technologies for selected nursing and patient-care applications.
CO3	Demonstrate the basic use of selected digital and wearable monitoring technologies in a simulated or supervised setting.

Unit V: Legal, Ethical And Quality Standards In Digital Health

Theory 20 hours · Simulation laboratory 12 hours

Learning objectives

- Apply legal, ethical and professional principles to digital nursing care.
- Identify privacy, consent, security and quality risks and appropriate responses.

Content

Legal framework for telehealth and digital health

- Introduction to legal and regulatory considerations in telehealth and digital health nursing.
- Overview of the Telemedicine Practice Guidelines, 2020, and their relevance to digital healthcare delivery.
- Legal responsibilities of healthcare professionals providing remote care.
- Scope of nursing practice and professional accountability in telehealth.

Ethical principles in digital nursing practice

- Principles of autonomy, beneficence, non-maleficence and justice in digital healthcare.
- Respect for patient dignity, preferences and informed decision-making.
- Ethical considerations in remote assessment and patient counselling.
- Maintaining confidentiality during virtual consultations.
- Appropriate use of patient information in teaching, research and clinical practice.

Data privacy, confidentiality and information security

- Concepts of privacy, confidentiality and information security in digital healthcare.
- Overview of the Digital Personal Data Protection Act, 2023, and its relevance to digital health, subject to applicable provisions and rules.
- Collection, processing, storage, access, sharing and retention of digital health information.

- Principles of data minimisation and purpose limitation.
- Secure handling of electronic health records and patient-generated data.

Teaching–learning activities

Lectures; case-based discussions on legal and ethical issues in telehealth; role-play on informed consent

Assessment methods

MCQs; case-based assignments on legal and ethical issues; role-play on informed consent;

Course outcomes (CO)

CO	Course outcome: the fellow will be able to
CO1	Explain the legal and regulatory considerations relevant to telehealth and digital health nursing.
CO2	Apply ethical principles, professional accountability and patient-centred communication in digital healthcare delivery.
CO3	Demonstrate appropriate practices for obtaining consent, documenting telehealth encounters and maintaining confidentiality.
CO4	Apply basic data privacy and information-security practices when handling electronic health information.

8. Clinical Practice: Postings (840 hours)

Clinical area	Weeks	Hours
Telehealth / virtual care service	6	200
Outpatient and chronic disease follow-up services	4	140
Health information / EHR–HMIS unit	4	140
Remote patient monitoring / digital devices	3	100
Community and home-health / mHealth services	3	100
Quality, safety and digital health governance	3	80
Digital health project / supervised case coordination	3	80
Total	**26**	**840**

Postings run in the order that suits the roster, but the telehealth and telenursing posting starts in Week 1, and the remote patient monitoring and digital health technology postings follow the teaching of the respective units. 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
Telehealth / virtual care	Prepare the patient and technology; support virtual encounters; document and arrange follow-up under supervision.
Outpatient / chronic care	Provide approved education, reinforce care plans and recognise when in-person review or urgent escalation is needed.
EHR / HMIS	Use training or authorised systems, maintain data accuracy and follow access control procedures.
Remote monitoring	Explain device use, check completeness of readings and escalate abnormal or concerning findings according to protocol.
Community / mHealth	Assess digital access and literacy; guide patients in using approved applications and resources.
Quality and governance	Apply confidentiality and security procedures; participate in audit and quality-improvement work.
Project / case coordination	Complete a supervised case study or service-improvement activity and present findings.

9. Essential Telehealth Skills and Logbook

The fellow maintains a logbook recording each activity, simulation and practical competency. Entries must be verified by the preceptor and reviewed by the guide. Patient-identifiable information must not be copied into personal notes or an unsecured logbook; use institution-approved identifiers and processes.

9.1 Procedures observed (O)

No.	Procedure	Min.
1	Observe a complete virtual consultation workflow	5
2	Observe EHR / EMR patient-record workflow	5
3	Observe remote patient-monitoring workflow	3
4	Observe digital referral and follow-up coordination	3
5	Observe a privacy / cyber security incident reporting or drill	1
6	Observe a digital health quality audit or dashboard review	2

9.2 Procedures assisted (A)

No.	Procedure	Min.	Sim
1	Patient preparation and identity verification for virtual care	10	
2	Consent and explanation of telehealth process	10	
3	Assistance with virtual consultation and communication	10	
4	EHR / EMR documentation under supervision	15	
5	Remote monitoring device orientation and reading capture	10	
6	Patient education on approved mHealth application	10	
7	Digital referral, follow-up or care-coordination workflow	5	

9.3 Procedures performed (P)

No.	Procedure	Min.	Sim
1	Conduct a simulated telehealth encounter using a structured checklist	5	
2	Complete a simulated remote triage and escalation scenario	5	
3	Enter and review a case in an authorised training EHR / EMR	10	
4	Provide patient / family education on remote monitoring or mHealth	10	
5	Review a set of remote monitoring readings and communicate findings per protocol	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 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

Component	Details	Marks	Minimum (50%)
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	Foundations of Digital Health	20	5
2	Telehealth and tele nursing operations	20	5
3	Health Informatics and Data Management	20	5
4	Emerging Technologies in Nursing	20	5
5	Legal, Ethical and Quality Standards	20	5
	Total	**100**	**25**

10.4 Practical skills assessment (60 marks)

Each fellow is assessed on three case scenarios in a simulated or supervised practical setting, with discussion. The three cases together should cover: (1) a virtual consultation or remote triage; (2) remote patient monitoring or chronic-care follow-up; and (3) digital documentation, privacy / ethics, or a data-quality / escalation scenario. Each case carries 20 marks.

Criterion	Marks
Preparation, patient identification, consent and safety	4
Communication, assessment and prioritization	4
Technical workflow / digital documentation / monitoring	6
Privacy, confidentiality, data security and professional conduct	3
Discussion: rationale, limitations, escalation and evidence	3
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 Tele-health and Digital Health Nursingcertificate 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 a telehealth / virtual-care service or approved simulation environment.
- Authorised EHR / EMR or training health information system with role-based access.
- Remote patient-monitoring devices and demonstration equipment, as available.
- Supervised access to outpatient, chronic-care, community or home-health follow-up services and digital health coordination workflows.
- Appropriate agreements or institutional permissions for external practical postings.

11.2 Simulation laboratory

- Computers or tablets, stable internet access, webcam, microphone and secure teleconferencing platform.
- Training EHR / EMR environment with fictional or de-identified sample records.
- Demonstration remote monitoring devices and sample datasets.
- Simulation scenarios for virtual consultation, consent, remote triage, escalation, documentation and privacy incidents

11.3 Classroom and learning resources

- Smart classroom, library and access to current digital health learning resources.
- Learning management system for notes, videos, assignments and logbook forms.
- Approved policies and guidance for telemedicine, privacy, cybersecurity, documentation and quality assurance.

11.4 Quality assurance

- Fellow feedback on every unit and posting; guide feedback to the committee at midpoint and completion.
- Annual curriculum review by the Fellowship Committee and updating to relevant guidance and institutional requirements.
- Grievance redressal through the Fellowship Coordinator, with escalation to the Dean.
- Confidentiality, informed consent and supervised practice must be maintained in all patient contact and digital systems.

12. Suggested References

- Government of India. Telemedicine Practice Guidelines, 2020, and applicable subsequent guidance.
- Government of India. Digital Personal Data Protection Act, 2023, and applicable rules / notifications in force.
- World Health Organization. Global Strategy on Digital Health 2020–2025 and related digital health resources.
- National Health Authority. Ayushman Bharat Digital Mission resources and health data standards, as applicable.

- Health Level Seven International (HL7). Standards and educational resources.
- SNOMED International. SNOMED CT introductory and implementation resources.
- World Health Organization resources on digital interventions, health information systems and digital health implementation.

Editions are to be fixed by the Board of Studies.

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
Telehealth / virtual care				
Outpatient / chronic care follow-up				
EHR / HMIS unit				
Remote patient monitoring				
Community / mHealth services				
Quality / governance				
Digital health project / case coordination				

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 TELE-HEALTH AND DIGITAL HEALTH 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