
Semester I

COURSE OF INSTRUCTION

Course/subject title	Total credits	Total hours (theory skill lab, clinical)
Communicative English	2	40
Applied Anatomy	3	60
Applied Physiology	3	60
Applied Sociology	3	60
Applied Psychology	3	60
Nursing Foundation-I Including First Aid Module—Theory	6	120
Nursing Foundation-I Including First Aid Module—Practical	4	240 (Skill lab—80, Clinical—160)
Self-study	—	40
Cocurricular	—	40
Total	24	720

(*Theory credits = 20, Practical credits = 04, Total = 24*)

SCHEME OF EXAMINATION

Course	Assessment (marks)				
	Internal	End semester college exam	End semester university exam	Hours	Total marks
Theory					
Communicative English	25	25	—	2	50
Applied Anatomy and Applied Physiology	25	—	75	3	100
Applied Sociology and Applied Psychology	25	—	75	3	100
Nursing Foundation-I	*25	—	—	—	—
Practical					
Nursing Foundations-I	*25	—	—	—	—

*Will be added to the internal marks of Nursing Foundation-II Theory and Practical respectively in the next semester (Total weightage remains the same)

NURSING FOUNDATION-I**LIST OF PROCEDURES/SKILLS**

Sl. no.	Procedural competencies/skills	Performs independently	Assists/observes procedures	Date		Signature of the Tutor/Faculty
				Skill lab/simulation lab	Clinical area	
I. Communication and Documentation						
1	Maintaining communication and interpersonal relationship with patient and families					
2	Verbal report					
3	Recording/documentation of patient care (written report)					
II. Monitoring Vital Signs						
	Temperature					
4	Oral					
5	Axillary					
6	Rectal					
7	Tympanic					
	Pulse					
8	Radial					
9	Apical					
10	Respiration					
11	Blood pressure					

Sl. no.	Procedural competencies/skills	Performs independently	Assists/ observes procedures	Date		Signature of the Tutor/Faculty
				Skill lab/ simulation lab	Clinical area	
III.	Hot and Cold Application					
12	Cold compress					
13	Hot compress					
14	Ice cap					
15	Tepid sponge					
IV.	Health Assessment (Basic First Year Level)					
16	Health history					
17	Physical assessment—general and system-wise					
18	Documentation of findings					
V.	Infection Control in Clinical Settings					
19	Hand hygiene (hand washing and hand rub)					
20	Use of personal and protective equipment					
	Biomedical waste: Infectious and non-infectious					
VI.	Comfort					
21	Open bed/admission bed					
22	Occupied bed					
23	Postoperative bed					
24	Supine position					

Sl. no.	Procedural competencies/skills	Performs independently	Assists/ observes procedures	Date		Signature of the Tutor/Faculty
				Skill lab/ simulation lab	Clinical area	
25	Fowler's position					
26	Lateral position					
27	Prone position					
28	Semiprone position					
29	Trendelenburg position					
30	Lithotomy position					
31	Changing position of helpless patient (moving/turning/ logrolling)					
32	Cardiac table/over-bed table					
33	Back rest					
34	Bed cradle					
35	Pain assessment (initial and reassessment)					
VII.	Safety					
36	Side rail					
37	Restraint (physical)					
38	Fall risk assessment and post fall assessment					

Sl. no.	Procedural competencies/skills	Performs independently	Assists/ observes procedures	Date		Signature of the Tutor/Faculty
				Skill lab/ simulation lab	Clinical area	
VIII.	Admission and Discharge					
39	Admission					
40	Discharge					
41	Transfer (within hospital)					
IX.	Mobility					
42	Ambulation					
43	Transferring patient from and to bed and wheelchair					
44	Transferring patient from and to bed and stretcher					
45	Range of motion exercises (ROM)					
X.	Patient Education					
46	Individual patient teaching					

SEMESTER I**LIST OF PRACTICAL REQUIREMENTS**

Sl. no.	Name of practical requirement	Date	Signature of the Teacher
I.	History Taking		
	1.		
	2.		
	3.		
	4.		
II.	Physical Examination		
	1.		
	2.		
III.	Fall Risk Assessment		
	1.		
	2.		
IV.	Pressure Sore Assessment		
	1.		
	2.		
V.	Nursing Process		
	1.		
	2.		
VI.	Completion of First Aid Module		
VII.	Completion of Health Assessment Module		

Signature of the Student

Signature of the Subject Coordinator

CLINICAL EXPERIENCE DETAILS

Name of the clinical area	Clinical condition	Number of days care given	Signature of Faculty/Preceptor

Signature of the Faculty Coordinator

Signature of the HOD/Principal

CERTIFICATE

This is to certify that Mr/Mrs/Ms _____ has satisfactorily completed his/her clinical posting of Nursing Foundation-I including First Aid Module Subject, as prescribed by Indian Nursing Council, New Delhi, and _____ University/Board at _____ Hospital.

From: -----/----- 22 to -----/----- 22.

Date:

Place:

Seal and Signature of the Principal

Signature of the Internal Examiner

Name:

Date:

Signature of the External Examiner

Name:

Date:

Supplementary Examination:

Signature of the Internal Examiner

Name:

Date:

Signature of the External Examiner

Name:

Date:

OTHER ASSIGNMENTS**Class Coordinator****Sign:** _____**Date:** _____**Principal****Sign:** _____**Date:** _____