



<b>Form: Course Syllabus</b>	<b>Form Number</b>	EXC-01-02-02A
	<b>Issue Number and Date</b>	2/3/24/2022/2963 05/12/2022
	<b>Number and Date of Revision or Modification</b>	
	<b>Deans Council Approval Decision Number</b>	2/3/24/2023
	<b>The Date of the Deans Council Approval Decision</b>	23/01/2023
	<b>Number of Pages</b>	48

1.	<b>Course Title</b>	<b>Maternal Health Nursing</b>
2.	<b>Course Number</b>	5701308
3.	<b>Credit Hours (Theory, Practical)</b>	3 credit hours (clinical)
	<b>Contact Hours (Theory, Practical)</b>	12 contact hours (clinical)
4.	<b>Prerequisites/ Corequisites</b>	5701206 /5701307
5.	<b>Program Title</b>	B.Sc. in Nursing
6.	<b>Program Code</b>	-
7.	<b>School/ Center</b>	School of Nursing
8.	<b>Department</b>	Maternal and Child Health Nursing
9.	<b>Course Level</b>	Third Year
10.	<b>Year of Study and Semester (S)</b>	2024/2025- Second Semester
11.	<b>Other Department (S) Involved In Teaching The Course</b>	None
12.	<b>Main Learning language</b>	English
13.	<b>Learning Types</b>	<input type="checkbox"/> Face to face learning <input type="checkbox"/> Blended <input type="checkbox"/> Fully online
14.	<b>Online platforms(s)</b>	<input type="checkbox"/> Moodle <input type="checkbox"/> Microsoft Teams
15.	<b>Issuing Date</b>	
16.	<b>Revision Date</b>	June 26, 2024

**17. Course Coordinator:**

Name:	Contact hours: By Appointment
Office number:	Phone number: -
Email:	

**18. Other instructors:**

Name:
Office number:
Phone number:
Email:



Contact hours:

Name:

Office numbers:

Phone numbers:

Email addresses:

Contact hours:

Name:

Office number:

Phone number:

Email:

Contact hours:

### 19. Course Description:

As stated in the approved study plan.

The course focuses on the application of the principles of primary health nursing care, which include maintaining the health of women and prevention of the disease through the application of the nursing process steps. This course focuses on the student's education and training on the application of skills related to the care of women during pregnancy, childbirth and post-natal, as well as teaching the students the skills related to family planning methods and caring for women with various diseases.

### 20. Program Intended Learning Outcomes: (To be used in designing the matrix linking the intended learning outcomes of the course with the intended learning outcomes of the program)

1. Demonstrate competency in performing the responsibilities of a professional nurse in delivering high-quality care to individuals, families, and groups
2. Apply principles of effective communication with peers, individuals, families, groups, and health care team.
3. Utilize critical thinking and problem-solving in planning and implementing nursing care for individuals, families, and groups.
4. Apply professional standards, values, and behaviors in providing nursing care for individuals, families, and groups.
5. Demonstrate safety measures to protect self, individuals, families, and groups
6. Translate organizational, leadership, interprofessional collaboration, and management concepts into nursing care for individuals, families, and groups
7. Utilize evidence-based practice in providing care for individuals, families, and groups.

### 21. Course Intended Learning Outcomes: (Upon completion of the course, the student will be able to achieve the following intended learning outcomes)

1. Distinguish normal and abnormal physiological and psychological changes.
2. Perform comprehensive health assessments for women
3. Interpreting physical examination findings for women



4. Apply nursing roles effectively according to clinical policies and guidelines
5. Apply effective communication in healthcare teams to achieve therapeutic outcomes
6. Design and deliver clear and culturally sensitive health education materials and sessions tailored to the needs of women and their families
7. Selecting appropriate nursing care for common and life-threatening health issues
8. Infer how the socio-cultural aspects of care affect family functioning and develop ways to make care more family-centered
9. Integrate professional code of ethics while caring for women and their families
10. Implement evidence-based practices to promote maternal and newborn safety in both routine and high-risk situations
11. Engage with collaborative activities among students, clients, health care providers and clinical instructors to implement required nursing care
12. Critically appraise healthcare practices and interventions to ensure alignment with evidence-based guidelines.
13. Critically assess available evidence to determine the most appropriate interventions for specific cases or situations under examination.
14. Apply up-to-date scientific evidence to support and justify care decisions for women and families

Course ILOs	The learning levels to be achieved					
	Remembering	Understanding	Applying	Analysing	evaluating	Creating
1		X				
2			X			
3				X		
4			X			
5			X			
6						X
7			X			
8				X		X
9			X			
10			X			



11			X			
12					X	
13				X	X	
14					X	

**22. The matrix linking the intended learning outcomes of the course with the intended learning outcomes of the program:**

Program ILOs / Course ILOs	ILO (1)	ILO (2)	ILO (3)	ILO (4)	ILO (5)	ILO (6)	ILO (7)
1	X						
2	X						
3			X				
4	X						
5		X					
6		X					
7			X				
8			X				
9				X			
10					X		
11						X	
12							X
13							X
14							X

**23. Topic Outline and Schedule:**



Week	Lecture	Topic	ILO/s Linked to the Topic	Learning Types (Face to Face/ Blended/ Fully Online)	Platform Used	Synchronous / Asynchronous Lecturing	Evaluation Methods	Learning Resources
1	1.1	Orientation period	1-3	Face to Face	-	Syn.	- Quiz	Ch.15: Antepartum Nursing Assessment
	1.2	Orientation period	1-3	Face to Face	-	Syn.	- Quiz	Ch.22: Process and stages of labor and birth
2	2.1	Orientation period	1-3	Face to Face	-	Syn.	- Quiz	Ch. 35: Postpartum Family Adaptation and Nursing Assessment Ch. 36: The Postpartum Family Need and Care
	2.2	Orientation period	1-3	Face to Face	-	Syn.	- Quiz	Ch. 32: newborn Nutrition
3	3.1	Antenatal clinical rotation	1-14	Face to Face	-	Syn.	- Professional Conduct - Performance checklist and health education at clinical sites - Clinical Final Written Exam	Ch. 5: Women's Health: Family Planning Ch.15: Antepartum Nursing Assessment Ch. 16: The Expectant Family: Needs and care Ch. 18: Maternal Nutrition
	3.2							
4	4.1							
	4.2							
5	5.1							
	5.2							
6	6.1							
	6.2							
7	7.1	Intrapartum clinical rotation	1-14	Face to Face	-	Syn.	- Professional Conduct	Ch. 22: Process and stages of labor and birth
	7.2							
8	8.1	rotation						



9	8.2						<ul style="list-style-type: none"> <li>- Performance checklist and health education at clinical sites</li> <li>- Clinical Final Written Exam</li> </ul>	Ch. 23: intrapartum Nursing Assessment Ch. 24: The family in childbirth: Needs and care Ch.25: Pain Management During labor Ch. 28: Birth-Related procedures.							
	9.1														
	9.2														
10	10.1														
	10.2														
11	11.1	Postpartum clinical rotation	1-14	Face to Face	-	Syn.	<ul style="list-style-type: none"> <li>- Professional Conduct</li> <li>- Performance checklist and health education at clinical sites</li> <li>- Clinical Final Written Exam</li> </ul>	Ch. 31: The Normal Newborn Need and care Ch. 32: newborn Nutrition Ch. 35: Postpartum Family Adaptation and Nursing Assessment Ch. 36: The Postpartum Family Need and Care Ch. 37: Home Care of The Postpartum Family							
	11.2														
12	12.1														
	12.2														
13	13.1														
	13.2														
14	14.1														
	14.2														
15	15.1								Final exam	1-14	Face to Face	-	Syn.	- Clinical Final Written Exam	All Chapters

#### 24. Evaluation Methods:

Opportunities to demonstrate achievement of the ILOs are provided through the following assessment methods and requirements:

Evaluation Activity	Mark	Topic(s)	ILO/s Linked to the Evaluation activity	Period (Week)	Platform



<b>Quiz</b>	10%	<p>Ch.15: Antepartum Nursing Assessment</p> <p>Ch.22: Process and stages of labor and birth</p> <p>Ch. 35: Postpartum Family Adaptation and Nursing Assessment</p> <p>Ch. 36: The Postpartum Family Need and Care</p> <p>Ch. 32: newborn Nutrition</p>	<b>1-3</b>	<b>2<sup>nd</sup> week</b>	-
<b>Professional Conduct</b>	15 %	This tool evaluates the student's adherence to attendance, communication proficiency when interacting with peers, instructors, patients, and healthcare team professionals, safe nursing practice, their level of initiative and understanding of course requirements, and readiness for clinical days through a commitment to designated readings from textbooks or other learning resources.	<b>1- 14</b>	By the end of each rotation	
<b>Performance checklist and health education at clinical sites</b>	<ul style="list-style-type: none"> <li>● Antenatal: 15%</li> <li>● Labor 15%</li> <li>● Postpartum 15%</li> </ul>	This tool evaluates the student's capability to put theoretical knowledge into practice in clinical settings and assesses their proficiency in performing a range of skills.	<b>1- 14</b>	By the end of each rotation	
<b>Clinical Final Written Exam</b>	30 %	Multiple choice questions and essay question	<b>1-14</b>	Week no.14	

## 25. Course Requirements



(e.g.: students should have a computer, internet connection, webcam, account on a specific software/platform... etc.):

**Face-to-face learning.**

## 26. Course Policies:

A- Attendance policies:

- Students must attend all classes of this course.
- Any student with an absence of 15% of the classes of any course, will not be allowed to sit for the final exam and will be given the university zero (F grade) in this course.
- In case (b) above, if a student submits an official sick report authenticated by the university clinic or an accepted excuse by the Dean of his/her faculty, the student will be considered as withdrawn from the course, and a "W" will be shown in the transcript for this course.
- Students are not allowed to come late to clinical settings or maternity labs. Any student coming late >30 minutes for more than 3 times will be marked absent.
- Students are not allowed to use their cell phones in the clinical area for capturing photos or videos or recording the clinical area, clients, and their families.

B- Absences from exams and submitting assignments on time:

- Failure to attend any course exam, excluding the final exam, will result in a score of zero unless the student presents a valid official excuse to the instructor and the instructor approves a makeup exam if feasible. The student bears the responsibility in cases where the excuse is not accepted by the instructor or there is no opportunity or time remaining for a makeup exam.
- Not attending the final exam will result in a zero score unless the student submits an official and acceptable excuse to the Dean of their faculty, who may grant permission for an incomplete exam. The scheduling of this incomplete exam will follow a period determined by the university.
- Assignments and projects should be submitted to the instructor on the due date.
- It is expected that all students will submit all assignments on time. If you need an extension, it must be requested from your instructor before the due date and may or may not be approved at the discretion of the course coordinator/instructor. Unexcused late assignments will be penalized 10% per day for each of the first two days overdue; on the 3rd day, the grade will be assigned as 0%.

C- Health and safety procedures:

Prior to attending the training at the university and the clinical settings, students should comply with the national legal obligation of receiving two doses of the COVID-19 vaccine. Moreover, students should comply with the Faculty of Nursing policies regarding pre-hospital training immunizations.





Students should comply with the training area policies regarding infection control, general precautions, and patient isolation.

**D- Honesty policy regarding cheating, plagiarism, misbehavior:**

Cheating, plagiarism, and misbehavior are attempts to gain marks dishonestly and include; but are not limited to:

- Copying from another student's work.
- Using materials not authorized by the institute.
- Collaborating with another student during a test, without permission.
- Knowingly using, buying, selling, or stealing the contents of a test.
- Plagiarism which means presenting another person's work or ideas as one's own, without attribution.
- Using any media (including mobiles) during the exam
- **The participation or the commitment of cheating will lead to applying penalties according to the University of Jordan Students' Discipline rules and regulations No. (94, 49, 47,27, 29) <https://units.ju.edu.jo/ar/LegalAffairs/Regulations.aspx>**
- **Students are prohibited from audio recording or taking photos during classes or sharing recorded materials with others in any manner without obtaining prior permission from the instructor. Failure to adhere to this rule and the improper dissemination of such materials may result in students being subject to legal investigations.**
- Bring with you full exam requirements (blue pen, pencils, sharpener, eraser), borrowing from others is not allowed.
- Do not bring any material related to the exam
- Do not bring your mobile phone to the Exam room
- Be in the exam room at least 10 minutes before the exam starting time
- It's not allowed to enter the exam room late. In case of coming late, you have to contact the course coordinator immediately
- It's not allowed to leave the Exam room before the end of the **END OF AT LEAST ONE-THIRD OF THE EXAM TIME.**
- Write your name and university number on the exam paper and computerized sheet using **Blue** pen only.
- Use pencil **ONLY** to shade your answers on the computerized answer sheet.
- Do not leave the examination room, except under exceptional circumstances at the discretion of the Senior Invigilator and you should be accompanied by an invigilator if needed.



- For Re-exam issues refer back to the university rules.

E- Grading policy:

- Grading policy in accordance with the regulations of the University of Jordan

F- Available university services that support achievement in the course:

- <https://library.ju.edu.jo/Elibrary/>

27. References:

- Ricci, S. S. (2020). Essentials of Maternity, Newborn, and Women's Health Nursing (5th ed.) Wolters Kluwer Health, Lippincott Williams & Wilkins.
- Lowdermilk, D., Cashion, M., Perry, S., Alden, K., Olshansky, E. (2020). Maternity and Women's Health Care (13th ed). Elsevier Inc.
- Davidson, M., London, M., & Ladewig, P. (2019). Olds' Maternal-Newborn Nursing & Women's Health across the Lifespan, 11th ed. (International Edition). Prentice Hall

Other resources:

- Lippincott Procedures for Nurses
- <https://www.youtube.com/watch?v=-yRYiJwHg8k&list=PLxVdpaMfvxLDVaCCnrPEw91xpkmTxJJtr>

28. Additional information:

\*\* All the assigned readings are from the required textbook. However other credible resources are appreciated to enrich our background.

Name of the Instructor or the Course Coordinator:	Signature:	Date:
.....	.....	.....
Name of the Head of Quality Assurance Committee/ Department	Signature:	Date:
.....	.....	.....
Name of the Head of Department	Signature:	Date:
.....	.....	.....
Name of the Head of Quality Assurance Committee/ School or Center	Signature:	Date:
.....	.....	.....
Name of the Dean or the Director	Signature:	Date:
.....	.....	.....



## Appendices

**The University of  
Jordan/Aqaba  
Faculty of Nursing**



**الجامعة الأردنية/ فرع العقبة  
كلية التمريض**



Student Name: .....

Date: .....

Instructor: .....

Clinical Area: .....

Professional Conduct					
Criteria	0	1	2	3	Comments
<b>Professionalism</b>					
<i>Punctuality</i>					
<i>Attire</i>					
<i>Attitude (Relationship with others, Cooperation, Response to feedback)</i>					
<i>Initiative</i>					
<b>Total ( /12)* 30%</b>					
<b>Quality of performance</b>					
<i>Knowledge base</i>					
<i>Competency level</i>					
<i>Safety</i>					
<i>Preparation for clinical day including assigned chapters for each area.</i>					
<b>Total ( / 12) * 70%</b>					

*Professional Conduct (5 marks) in each clinical rotation*



Criteria	Excellent (3)	Average (2)	Poor (1)	Not available (0)
<b>1. Professionalism ( / 12) * 30%</b>				
<b><i>Punctuality</i></b>	Attends to the clinical setting precisely on time and is willing to give more time when needed. Attends regularly as scheduled. Reports to the instructor when a delay is possible and is willing to make up for time missed.	Generally attends on scheduled time and provides reasonable explanations for any delays or absenteeism.	Barely attends on scheduled time and provides irrational excuses for absenteeism.	Does not respect the time schedule for attendance and does not notify the instructor of absence or delay.
<b><i>Attire</i></b>	Consistently dressed professionally and is well-groomed.	Generally dresses appropriately for the practicum environment and is generally well-groomed.	Dresses inappropriately for the practicum environment and is poorly groomed.	Does not follow the school's dress code.
<b><i>Poise &amp; attitude</i></b>	Self-assured and displays a confident, courteous, and positive attitude at all times.	Shows some hesitant behaviors or lacks confidence when under stress or pressure of work/study.	Shows little self-confidence and displays a negative attitude when under pressure.	Always shows a negative attitude and disrespect.



<b>Initiative</b>	Eager to participate, makes suggestions, is inquisitive, and takes on added responsibility.	Demonstrates some enthusiasm but only after receiving instructions or remarks from the instructor.	Exhibits little energy or enthusiasm, seldom volunteers for tasks.	Never shows enthusiasm to assist others and lacks a voluntary spirit.
<b>2. Quality of performance ( / 12)* 70%</b>				
<b>Knowledge base</b>	Displays a sufficient scientific background in the clinical situation and can provide rationalization for performed tasks.	Displays some scientific background but cannot give rationalization for performed tasks.	Displays minimal scientific background and cannot give rationalization for performed tasks.	Significant knowledge deficit, lacks basic information.
<b>Competency level</b>	Functions independently without supportive cues.	Functions with supervision, requiring occasional cues.	Functions with dependence, requiring frequent verbal and occasional physical directive cues.	Incompetent in all aspects.
<b>Safety</b>	Functions with optimal awareness of actual or potential health hazards.	Functions with minor threats to safety guidelines.	Neither aware nor reports threats that affect safety, shows risky behaviors.	Acts show unsafe measures of practice, safety precautions were not applied or considered
<b>Preparation for clinical day including assigned chapters for each area</b>	Exceptionally well-prepared for the clinical day, demonstrating a comprehensive understanding of tasks and responsibilities.	Adequately prepared for the clinical day, demonstrating a reasonable understanding of tasks	Minimally prepared for the clinical day, with some gaps in understanding and readiness.	Consistently fails to prepare for the clinical day, leading to significant issues with tasks and responsibilities.,

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Instructor's Signature: -----

Student's Signature: -----

Date: -----



## Antenatal Evaluation Papers

**History taking (5 marks):**

**Student Name:** .....

**Date:** .....

**Instructor:** .....

**Clinical Area:** .....

**Key:**

**Total Score: 56 (0-4 points for each of the 14 items)**

**0: Incompetent      1: Poor      2: Good      3: Very good      4: Excellent.**

*\*The student's total mark will be reduced by 20% once, regardless of the number of safety points missed, if not assessed correctly.*

History taking							
	Items	0	1	2	3	4	Notes
1	Establishes a therapeutic relationship.						
2	Obtain personal history						
3	Obtain a medical and surgical history						
4	Obtains gynecological history						
5	Obtains obstetric history (GTPALM), (GP <sup>+</sup> A) (Definition of Terminology)						
6	First day of Last Menstrual Period (LMP)						
7	Calculate E.D.D.						
8	Calculate GA						

9	<p><b>Current pregnancy history</b></p> <ul style="list-style-type: none"> <li>● Antenatal visits early &amp; adequate</li> <li>● Complications</li> </ul>						
10	<p>Discomfort during pregnancy (The Expectant Family: Needs and Care –Ch. 16)</p>						
11	<p><b>Danger signs in pregnancy*</b></p> <ul style="list-style-type: none"> <li>● Sudden gush of fluid from vagina</li> <li>● Vaginal spotting or bleeding</li> <li>● Abdominal pain</li> <li>● Temperature above 38.3°C and chills</li> <li>● Dizziness, blurred vision</li> <li>● Persistent nausea and vomiting</li> <li>● Severe headache</li> <li>● Edema of hands or face</li> <li>● Seizures or convulsions</li> <li>● Epigastric pain</li> <li>● Dysuria</li> <li>● <b>Absent or decreased fetal movements**</b></li> </ul> <p><b>Signs of preterm labor**</b></p>						

	<ul style="list-style-type: none"> <li>• Painful menstrual-like cramps</li> <li>• Pelvic pressure or heaviness</li> <li>• Uterine contraction felt every 10 minutes for 1 hour</li> </ul>						
12	Laboratory results (Blood group & Rh, FBS, Urine analysis-protein and sugar... etc.)						
13	Weight chart						
14	Blood pressure						
Total (5 marks)							

**Instructor's Signature:** -----

**Student's Signature:** -----

**Date** -----



<b>Creativity</b>  (30 points)	<ul style="list-style-type: none"> <li>● Provides a very original presentation of material, uses unexpected elements effectively, and captures the audience's attention.</li> </ul>	<ul style="list-style-type: none"> <li>● Some originality is apparent, and there's good variety and blending of materials/media</li> </ul>	<ul style="list-style-type: none"> <li>● Little or no variation, material presented with little originality or interpretation.</li> </ul>	<ul style="list-style-type: none"> <li>● Repetitive with little or no variety, insufficient use of multimedia.</li> </ul>	
<b>Contact with audience/ Handling questions</b>  (20 points)	<ul style="list-style-type: none"> <li>● Consistently clarifies, restates, and responds to questions, summarizing when needed.</li> </ul>	<ul style="list-style-type: none"> <li>● Generally responsive to audience comments, questions, and needs.</li> </ul>	<ul style="list-style-type: none"> <li>● Misses some opportunities for interaction and responds to questions inadequately..</li> </ul>	<ul style="list-style-type: none"> <li>● No questions are answered, no interpretation made, and a lack of interaction with the audience.</li> </ul>	
<b>Speaking Skills</b>  (10 points)	<ul style="list-style-type: none"> <li>● Demonstrates poised, clear articulation, proper volume, steady rate, good posture, eye contact, enthusiasm, and confidence</li> </ul>	<ul style="list-style-type: none"> <li>● Clear articulation but not as polished, some mumbling, little eye contact, uneven rate, and limited expression.</li> </ul>	<ul style="list-style-type: none"> <li>● Inaudible or too loud, no eye contact, rate too slow or fast, speaker seemed uninterested, and used a monotone voice.</li> </ul>	<ul style="list-style-type: none"> <li>● Severe issues with speaking skills.</li> </ul>	

<b>Length of Presentation</b>  (10 points)	<ul style="list-style-type: none"> <li>• Within one-two minutes of allotted time +/-</li> </ul>	<ul style="list-style-type: none"> <li>• Within two-four minutes of allotted time +/-</li> </ul>	<ul style="list-style-type: none"> <li>• Within four-six minutes of allotted time +/-</li> </ul>	<ul style="list-style-type: none"> <li>• Too long or too short, ten or more minutes above or below the allotted time.</li> </ul>	
<b>Use audio-visual aids</b>  (10 points)	<ul style="list-style-type: none"> <li>• Uses audio-visual aids effectively and appropriately to clarify the subject.</li> </ul>	<ul style="list-style-type: none"> <li>• Use of audio-visual aids helps to clarify the subject in an acceptable degree.</li> </ul>	<ul style="list-style-type: none"> <li>• Audio-visual aids are poorly used to clarify the subject.</li> </ul>	<ul style="list-style-type: none"> <li>• No usage of audio-visual aids</li> </ul>	

**Instructor's Signature:** -----

**Student's Signature:** -----

**Date** -----

## **Case study (10 marks)**

### Case Study Instruction:

The objective of this assignment is for student groups, with a maximum of three members per group, to collaboratively research, analyze, and present a case study focusing on a high-risk pregnancy. First, each group must select a high-risk pregnancy case with ample available information for analysis. Then, students are required to produce two key components: a written document and a presentation.

In the written document, groups should provide a comprehensive report that delves into the patient's medical history, prenatal care, complications, treatment, and outcomes. Proper formatting, citations, and a bibliography are essential for this portion of the assignment. The second component involves creating a presentation that summarizes and highlights the critical aspects of the case study. Visual aids, such as charts or images, should be incorporated to enhance understanding. Each group is also expected to present their case study to the class on the specified presentation day.

Throughout the process, students are encouraged to collaborate effectively within their groups, ensuring that all members contribute equally to research, documentation, and presentation. These assignments will be evaluated based on a provided rubric, and the final marks will reflect the quality of the document and the effectiveness of the presentation. If students have any questions or

require assistance during this assignment, they are encouraged to seek guidance from their instructor. This project not only enhances their understanding of high-risk pregnancies but also fosters teamwork and presentation skills.

**Student Name:** .....

**Date:** .....

**Instructor:** .....

**Clinical Area:** .....

<b>Evaluation Criteria for Case Study</b>				
<b>NO</b>	<b>Criteria</b>	<b>Marks allotted ( % )</b>	<b>Mark obtained ( % )</b>	<b>Comments</b>
	A clear and concise introduction that provides an overview of the case study.	<b>5</b>		
	<b>Theoretical Background</b> <ul style="list-style-type: none"> <li>• Accurately explains the physiological and medical basis for high-risk pregnancy conditions, emphasizing nursing implications.</li> </ul>	<b>15</b>		



	<ul style="list-style-type: none"> <li>Integrates relevant nursing care models and evidence-based practices into the case study analysis.</li> </ul>			
	Describes the medication regimen accurately and evaluates its appropriateness for the client's condition.	<b>5</b>		
	Includes relevant laboratory results, interprets them in the context of the case, and discusses their significance.	<b>5</b>		
	<b>Nursing care plan</b>	<b>35</b>		
	<p>a. Assessment</p> <p>Conducts a comprehensive nursing assessment of the patient's condition, including physical, psychosocial, and cultural factors.</p>			
	<p>b. Diagnosis</p> <p>Formulates a clear and accurate nursing diagnosis</p>			

	<p>based on the nursing assessment findings.</p> <p>Identifies and prioritizes nursing care needs specific to high-risk pregnancy.</p>			
	<p>c. Planning</p> <p>Develops a detailed nursing care plan that addresses the unique needs of the high-risk pregnancy case, based on current evidence.</p>			
	<p>d. Intervention</p> <p>Provides nursing interventions that are evidence-based, patient-centered, and promote safety.</p>			
	<p>e. Evaluation</p> <p>Evaluate the effectiveness of the nursing care plan and</p>			

	suggest modifications if necessary.			
	<p><b>Integration of Research</b></p> <ul style="list-style-type: none"> <li>● Demonstrates the integration of current nursing research findings and evidence-based guidelines into the case management plan.</li> <li>● Cites relevant nursing studies, clinical guidelines, or systematic reviews that support the chosen nursing interventions.</li> <li>● Highlights how evidence-based practice influences decision-making in nursing care.</li> </ul>	<b>15</b>		
	<b>Communication</b>	<b>5</b>		

	<ul style="list-style-type: none"> <li>● Communicates the information in a clear and understandable manner.</li> <li>● Utilizes professional terminology effectively and appropriately.</li> </ul>			
	<p><b>Critical thinking</b></p> <ul style="list-style-type: none"> <li>● Applies systematic thinking to analyze the case and nursing care plan.</li> <li>● Demonstrates the ability to identify and solve challenges or issues related to the case study.</li> </ul>	5		
	<p><b>Bibliography</b></p> <ul style="list-style-type: none"> <li>● Provides a comprehensive bibliography that includes all sources cited in the case study.</li> </ul>	5		
	<p><b>Presentation</b></p>	5		

	Overall presentation, including formatting, organization, and clarity of the document.			
	<b>Total marks (100)</b>			

**Instructor's Signature:** .....

**Student's Signature:** .....

**Date** .....

## **Labor evaluation Papers**

### **Labor Skills Assessment Instructions (10 marks):**

In the labor skills assessment, students will undergo individual evaluations, including the abdominal physical exam using a laboratory model and a contraction assessment or placenta evaluation in a hospital setting. The assessment will be scored according to a provided rubric. Following the assessment, you will receive detailed feedback regarding your performance. This feedback will highlight your strengths and areas that may require improvement.

Student Name: .....

Date: .....

Instructor: .....

Clinical Area: .....

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Uterine contraction palpation							
	Items	0	1	2	3	4	Notes
1	Ask women to void						
2	<b>Have the women lie on her left side or to be in semi-fowler position to prevent supine hypotension syndrome*</b>						
3	Place the palmar surface of the fingers on the uterine fundus and palpate lightly						
4	Determine the <b>frequency*</b> of the contractions by noting the time from the beginning of one contraction to the beginning of the next						

5	Determine the <b>duration</b> * of the contraction by noting the time when tensing of the fundus is first felt (beginning of contraction) and again as relaxation occurs (end of contraction)						
6	Determine <b>intensity</b> * during the acme of the contraction, intensity can be evaluated by estimating the indentability of the fundus						
Total (5 marks)							

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Examination of the placenta							
	Items	0	1	2	3	4	Notes
1	Personal protective equipment.						
2	Placental presentations a. Schultze mechanism b. Duncan mechanism						
3	The size of the placenta (diameter, thickness and weight)						
4	Completeness of placenta (cotyledons)* with Rational						
5	Hematomas or calcifications (white–yellow areas) with rational						
6	Umbilical cord a. Number of blood vessels* b. Length and width						

	<ul style="list-style-type: none"> <li>c. Wharton jelly</li> <li>d. Knots or thrombi</li> <li>e. Point of insertion</li> </ul>						
7	<p>The membranes</p> <ul style="list-style-type: none"> <li>a. Color</li> <li>b. Completeness (single hole) *</li> <li>c. The amnion and the chorion are both present</li> <li>d. Blood vessel in the membranes</li> </ul>						
8	The odor of the placenta and its membranes with rationale						
9	Definition of Succenturiate placenta and its clinical indication						
10	Definition of Velamentous Cord Insertion and its clinical indication						
11	Battledore placenta and its clinical indication						
Total (5 marks)							

**Note: Refer to Placenta examination at Lippincott procedure**

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- **Processes and Stages of Labor and Birth** Ch. 22
- **Intrapartum Nursing Assessment** Ch. 23

Examination of The Gravid Uterus							
	Items	0	1	2	3	4	Notes
1	<b>Preparation (Position*</b> , Empty bladder, flex knee)						
2	<b>Inspection</b> (Shape, Size, Linea Nigra, Striae, Fetal movements, Umbilical hernia, Previous scare)						
3	Fundal height <b>a. Abdominal palpation in relation to anatomical landmarks</b> <b>b. Symphysis-fundal height</b>						

4	Leopold maneuvers <b>a. First maneuver</b> <b>b. Second maneuver</b> <b>c. Third maneuver</b> <b>d. Fourth maneuver</b>						
5	<b>Locates and auscultates FHR*</b>						
6	<b>Differentiates sounds other than fetal heart sound*</b>						
<b>Total (5 marks)</b>							

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**Case Study Analysis on Labor Progress and CTG Analysis in the Lab (5 Marks)**

Students will be provided with a labor case study and will have one hour to answer questions related to labor progress, CTG (Cardiotocography) analysis, and to formulate appropriate nursing interventions. This task aims to assess your ability to analyze a labor case and provide nursing interventions based on your analysis.

## Postpartum Evaluation Papers

*Postpartum history taking (5 marks):*

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History taking- Postpartum							
	Items	0	1	2	3	4	Notes
1	Demographic history						
2	Medical and surgical history						
3	Menstrual history						
4	<b>Obstetrical</b> history						
5	Gynecological history						
6	Current pregnancy history <ul style="list-style-type: none"> <li>● Antenatal visits (Early, adequate)</li> <li>● Complications</li> </ul>						
7	Current labor history (delivery date and time,						

	gestational age, gender, baby birth weight, length of labor, type of delivery, anesthesia used-epidural, spinal, or general), complications (maternal and infant).						
8	Postpartum medical concerns (Bladder function, Bowel function, Perineal discomfort, Cesarean section wound, Mood, emotional problems, postpartum depression)						
9	Family planning history						
10	Breastfeeding history						
11	<b>Need for RH-immunoglobulin*</b>						
12	Vital signs and pain score						
<b>Total (5 marks)</b>							

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**Postpartum skills (10 marks):**

**Postpartum Skills Assessment Instructions:**

The postpartum skills assessment aims to evaluate your proficiency in conducting essential clinical procedures related to postpartum care. You will be assessed on one of two procedures: either involution, lochia, perineal, and lower extremities or breast clinical examination.

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Assessing the Status of the Uterine Fundus after Vaginal or Cesarean Birth							
	Items	0	1	2	3	4	Notes
1	Establish a therapeutic relationship						
2	<b>Empty bladder*</b> , lie flat in bed, slight knee flex						
3	<b>Gently place one hand on the lower segment of the uterus*</b> . Using the side of the other						



	hand, palpate the abdomen to locate the top of the fundus						
<b>4</b>	Determine whether the fundus is firm. <b>If it is not firm, massage until the fundus is firm*</b>						
<b>5</b>	Measure the top of the fundus in fingerbreadth above, below, or at the umbilicus.						
<b>6</b>	<b>Determine the position of the fundus in relation to the midline of the body. Evaluate the bladder for distention*.</b>						
<b>7</b>	Nursing interventions when a woman has postpartal uterine atony						
<b>8</b>	Educate mother about Afterpain						
<b>9</b>	Educate mother about Cesarean section wound care						
<b>Total (---- marks)</b>							

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Assessment of Lochia							
	Items	0	1	2	3	4	Notes
1	Describe Lochia (color, type, amount, smell & presence of clots*).						
2	Educate mother about abnormal change in character of lochia (increased amount, resumption of bright red color, passage of clots, foul odor)						
3	What are the signs of postpartum hemorrhage						
4	Uterine Stimulants used to prevent and manage uterine atony (Oxytocin, Methergine): dosing information, contraindication, expected effects, and side effects.						

<b>Total (----marks)</b>	
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Assessment of Perineal area							
	Items	0	1	2	3	4	Notes
1	Assess perineal area using REEDA scale and appropriate position						
2	Bladder function (educate mother to report frequency, urgency, or burning on urination)						
3	Bowel function						

4	Educate mother about measures to decrease perineal discomfort						
5	Educate mothers about Kegel Exercises.						
6	<b>Educate mother to report persistent perineal pain, redness, foul drainage, or separation of perineal incision*</b>						
<b>Total (---- marks)</b>							

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Assessment of Lower Extremities							
	Items	0	1	2	3	4	Notes
1	Observe the patient's legs: varicose veins, redness, difference in size, edema						

2	Measure difference in calf circumference diameter if asymmetry in size is noticed						
3	Palpate the legs for Temperature of each leg. Starting distally, feel with the back of your hand and compare the legs to each other noting any difference.						
4	Palpate for tenderness						
5	What are the factors that contribute directly to the development of postpartum thromboembolic disease?						
6	<b>Educate mother about possible symptom of DVT (Localized tenderness, redness, edema, or warmth of the legs) *</b>						
7	Educate mother about measures to decrease risk of thromboembolic <b>disease</b> in postpartum period.						
<b>Total (---- marks)</b>							

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Breast Clinical Exam (BCE)							
	Items	0	1	2	3	4	Notes
1	Greet the women, introduce yourself						
2	Explain the procedure						
3	<b>Provide privacy**</b>						
4	<p><b>Inspect</b> the breast while the woman in a sitting position facing the examiner. An alternative draping method is to use a short gown, open at the back, and lift it up to the women's shoulders during inspection.</p> <p><b>Inspect for:</b></p> <ul style="list-style-type: none"> <li>• <b>General appearance:</b> note the symmetry of size and shape</li> </ul>						
5	<ul style="list-style-type: none"> <li>• <b>Skin:</b> smooth, even color, and no edema is present. Note any localized area of redness, bulging, or dimpling. Also, note any skin lesions or focal vascular patterns</li> </ul>						

6	<ul style="list-style-type: none"> <li>● <b>Nipple:</b> should be symmetrically placed on the same plane on the two breasts. Nipples usually protrude. Distinguish a recently retracted nipple from one that has been inverted for many years or since puberty.</li> </ul>						
7	Maneuver to screen for retraction						
8	<b>Inspect and palpate the axillae**</b>						
9	Tuck a small pad under the side to be palpated						
10	<b>During palpation</b> <ul style="list-style-type: none"> <li>● To palpate the lateral portion of the breast, have the patient roll onto the opposite hip, positioning the patient's hand (on the same side as the breast you're examining) on the forehead but keeping the shoulders pressed against the examination table</li> </ul>						
11	<ul style="list-style-type: none"> <li>● To palpate the medial portion of the breast, ask the patient to lie with the shoulders flat on the examination table, placing the patient's hand at the neck and lifting the elbow until it's even with her shoulder.</li> </ul>						
12	Use the pads of your first three fingers						
13	<b>Make three circles with the finger pads, increasing the level of pressure with each circle**</b>						
14	Palpation by vertical overlapping strip pattern						
15	<b>Use landmarks to cover all breast tissue**</b> (down the midaxillary line, across the inframammary ridge at the fifth/sixth rib, up the lateral edge of the sternum, across the clavicle)						
16	<b>Tissue at and beneath the nipple should be palpated, not squeezed**</b>						

17	Palpate for: <ul style="list-style-type: none"> <li>● Texture and elasticity</li> <li>● Tenderness and temperature</li> <li>● <b>Mass (Location, Size, Shape, Consistency, Movable, Distinctness, Nipple, Note the skin over the lump, Tenderness &amp; Lymphadenopathy)</b></li> </ul>						
18	A careful exam should take approximately 3 min for the average size breast**						
19	Hand washing (pre-post)						
20	Document findings						
<b>Total (---- marks)</b>							

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**Student's Signature:-----**

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