SUMANDEEP VIDYAPEETH

(Declared as Deemed to be University under Section 3 of the UGC Act 1956)

Accredited by NAAC with a CGPA of 3.53 out of four-point scale at 'A' Grade

Category – I deemed to be university under UGC Act - 2018

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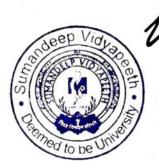
CURRICULUM

Attested CTC

Vice-Chancellor

Sumandeep Vidyapeeth An Institution Deemed to be University Vill. Piparia, Taluka: Waghodia. Dist. Vadodara-391 760. (Gujarat)

Diploma
Dist. Vadodara-39
in
OLD AGE MEDICAL ASSISTANT



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AMENDED UP TO DECEMBER -2020

INTRODUCTION

Scope

The quality of paramedical care has improved tremendously in the last few decades due to the advances in technology, thus creating fresh challenges in the field of healthcare. It is now widely recognized that health service delivery is a team effort involving both clinicians and non-clinicians, and is not the sole duty of physicians and nurses. Professionals that can competently handle sophisticated machinery and advanced protocols are now in high demand. In fact, diagnosis is now so dependent on technology, that paramedical and healthcare professionals are vital to successful treatment delivery.

Effective delivery of healthcare services depends largely on the nature of education, training and appropriate orientation towards community health of all categories of health personnel, and their capacity to function as an integrated team, with a range of skills and expertise, play key roles within the National Health Service, working autonomously, in multi-professional teams in various settings. All of them are first-contact practitioners and work across a wide range of locations and sectors within acute, primary and community care.

Learning goals and objectives for allied and healthcare professionals

The learning goals and objectives of the undergraduate and graduate education program will be based on the performance expectations. They will be articulated as learning goals (why we teach this) and learning objectives (what the students will learn). Using the framework, students will learn to integrate their knowledge, skills and abilities in a hands-on manner in a professional healthcare setting.

Program outcomes

After completion of Course the student will develop intellectual and imaginative abilities in order to facilitate the development of independent judgment and problem-solving skills

- To ensure operating room environment is safe and the operative procedure is conducted under conditions that maximize patient safety.
- To prepare professionals to be expert in theory and application of the principles of asepsis and sterile techniques.
- To combine knowledge of human anatomy, surgical procedures and implementation of tools to facilitate a physician's performance of diagnostic procedures.

Ethics and accountability

Students will understand core concepts of clinical ethics and law so that they may apply these to

Pescribe and apply the basic concepts of clinical ethics to actual cases and situations

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- Recognize the need to make health care resources available to patients fairly, equitably and without bias, discrimination or undue influence
- Demonstrate an understanding and application of basic legal concepts to the practice
 Employ professional accountability for the initiation, maintenance and termination of patient-provider relationships
- Demonstrate respect for each patient's individual rights of autonomy, privacy, and confidentiality

Commitment to professional excellence

The student will execute professionalism to reflect in his/her thought and action a range of attributes and characteristics that include technical competence, appearance, image, confidence level, empathy, compassion, understanding, patience, manners, verbal and non-verbal communication, an anti-discriminatory and non-judgmental attitude, and appropriate physical contact to ensure safe, effective and expected delivery of healthcare.

Eligibility criteria:

Candidate must have completed 10+2 from a recognized board.

Duration of the course:

Duration of the course is 2 year and 1 year internship

Medium of instruction:

English shall be the medium of instruction for all the subjects of study and for examination of the course.

Attendance

A candidate has to secure minimum 80% attendance in overall with at least-

- 1. 75% attendance in theoretical
- 2. 80% in Skills training (practical) for qualifying to appear for the final examination.

No relaxation, whatsoever, will be permissible to this rule under any ground including indisposition etc.

Assessment:

Assessments should be completed by the academic staff, based on the compilation of the student's theoretical & clinical performance throughout the training programme. To achieve this, all assessment forms and feedback should be included and evaluated. Student must attain at least 50% marks in each Theory, Internal assessment and Practical independently / separately for each individual subject.

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COURSE OF INSTRUCTION

Course Name	Course Code	Theory (In hrs.) (Class and lab)	Practical (In hrs.) (Clinical)	
First Year - Total Hours 600				
Psychology	DOAMA101	60	40	
Sociology	DOAMA102	60	40	
Applied Anatomy & Physiology	DOAMA103	60	40	
Gerontologicalnursing	DOAMA104	60	40	
Community Health y	DOAMA105	60	40	
Total		360	240	
Second Year - Total Hours 400				
Psychiatric problems of older persons	DOAMA201	60	40	
Malignancies of ageing	DOAMA202	60	40	
Counseling the older person	DOAMA203	60	40	
Supervision & Management	DOAMA204	60	40	
Total		240	160	
Internship (Integrated Practice)	Total Hours 1140			

SCHEME OF EXAMINATION

Course	Course	Assessment			
	Code	Hours	Internal	External	Total
First Year					
Psychology	DOAMA101	3	20	80	100
Sociology	DOAMA102	3	20	80	100
Applied Anatomy & Physiology	DOAMA103	3	20	80	100
Gerontologicalnursing	DOAMA104	3	20	80	100
Community Health y	DOAMA105	3	20	80	100
Total		120	480	600	
Second Year					
Psychiatric problems of older	DOAMA201	3	20	80	100
persons					
Malignancies of ageing	DOAMA202	3	20	80	100
Counseling the older person	DOAMA203	3	20	80	100
Supervision & Management	DOAMA204	3	20	80	100
Total			80	320	400

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Syllabus:

	r. No 1 ST YEAR DIPLOMA IN OLD AGE MEDICAL AS Subjects Content Topics Co		Topics covered
	-		
1.	Psychology	Review	 Individual differences Learning, Motivation, attention &perception Emotions Developmental needs of older adults Psychological changes in ageing Human behavior & needs in crisis Stress & coping in crisis situations Leadership Communication andIPR Counselling Attitudes and humanizing care
DOAM	A101 (60HOUR	(S)	
DOT (IVI)	Sociology	Review	Social organization &community
2.			resources Leadership roles in community, Social roles & aspects in care of older persons Family and family relationships Socio cultural influences on care of older persons The personal & social problems of the family.
		Demography and Demographic transition	 Ageing population Definition, meaning, population trends – global and Indian
	ē	Ageing & ageing process	 What is ageing? Ageing theories Ageing process Psychosocial aspects of ageing
Attest	ed CTC	Social support & services for ageing	 Implementation of National policy and National Health policy for older persons Ageing &society

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			 Agencies working for elderly: national& state: Social support & social networking, self-help groups, elderly clubs, role of police Welfare measures & provisions for the older persons
DOAM	A102(60HOURS)		
3.	Applied Anatomy & Physiology	Review: age related changes in	 Nervous system Respiratory system Cardiovascular system Gastro intestinal system Endocrine system Musculoskeletal system Genitourinary system Reproductive system Sensory organs
DOAM	A103(60HOURS)		
4.	Gerontologicaln ursing	Introduction to Gerontologicaln ursing	 Definition, concepts and principles of gerontologicalnursing Definition of terms Nursing process Levels of erotological care and role of nurse Principlesofpreventionofinfectionsin older persons Standard safety measures & biomedical waste management
	79	Geriatric nursing Assessment	 Baseline Evaluation of newly –worsened health status or newly discovered risk factor Components Clinical
Attest	ed CTC	ordee	 Functional Activities of Daily Living(ADL) Environment Social support Mini mental status
Scallice-Chan	cellor	No.	examination

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		Multi-disciplinary geriatric
		assessment genatic
		Geriatric nursing Assessment Tools 2 and as for assessment
	Healthy ageing	Tools & scales for assessment Health risks in older persons- Smoking, Alcohol
DOAMA404/COLIQUES		Health promotion: Nutrition Exercise Screening Prevention of accidents Prevention of substance use-alcohol, dragster Smoking cessation Prevention of adverse drug reactions
DOAMA104(60HOURS)		
5. Community Health	Health services and programs for older persons	 Types of services for care of older persons: Health promotion &disease prevention: Health education Screening of general health Screening for cancer of uterine cervix Specific health promotion programs (smoking cessation, immunization)
· ·		Curative: □ Early diagnosis & treatment of
Attested CTC		day to day ill
No		health in PHC, Medicare/mobil
	ndee	u v/~ > iviedicare/mobil

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□ Health
insurance/securities
□ Diagnosis &
treatment of
serious ill health
in secondary &
tertiary care
hospitals
□ Chronic care in
home/ long-term
care institutions,
Rehabilitative:
physiotherapy, restorative
surgery, Prosthesis,
occupational therapy
Mental health services: counseling
services
for retirement, relocation,
widowhood & bereavement, drug
& substance abuse, ambulatory
treatment for mental diseases
Organization of services for older
people
Health education:
concepts, principles,
approaches and methods
Contents of health education for

DOAMA105(60HOURS)

PRACTCALS 40MARKS

Each student shall undergo training in Skill Simulation Laboratory for learning certain basic clinical skills like IV/IM injection, setting IV line, Cardio-pulmonary resuscitation (CPR), and Life support skills in the beginning of second year, for duration of continuous four days. (Board of Studies letter No.:FPMS/SV/BOS-MIN/0006/2016-17, dated 19/04/2017, and vide notification of Board of Management resolution Ref.:No. SVDU/R/2017-18/5056, dated 09/01/2018).

older persons

2NP YEAR DIPLOMA IN OLD AGE MEDICAL ASSISTANT

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DOAM	Psychiatric problems of older persons A201(60HOURS)		sorders et stance abuse mpairment &Dementia
	Malignancies of ageing	radiotherap QOL in old Palliative companion Hospice ca	of management: surgery, by, chemotherapy er persons with cancer are,
DOAM	A202(60HOURS)		
3.	Counseling the older person	counseling - Counse - Commo - Special older persons: bereavement, clir	ling the older person In problems requiring counseling considerations in counseling the retirement, relocation, widowhood & macteric, relationships, drug & substance g, ambulatory treatment for mental diseases • Definition &spectrum • Identification of elder abuse • Likely victims • Prevention &Management • Counseling clients, abuser/family
		Care giver stress	 Burden of caregiving Assessment of care giver burden Supporting the caregiver
Attest	ed CTC	Rehabilitation & Occupational therapy	Needs Principles Components assisting devices innovations
Share ice-Change	Supervision & Management	Management dee	D (111 AD 1 1 1

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	Staffing, Reporting, Recording and Budgeting Management of service settings for elderlye.g. Geriatric clinics, wards, hospitals, mobile clinics, old age homes etc. Time, material & personnel LayoutandDesignofunitsforcareofeld erly: home, institution
Clinical supervision	 Introduction, definition and objectives of supervision Principles & Functions of supervision Qualities of supervisors Responsibilities of clinical supervisors Practice Standards of care of elderly Policies and Procedures Establishing Standing orders and Protocols Orientation programme for new recruits Quality Assurance Programme in geriatric units Nursing audit Performance Appraisal

DOAMA203(60HOURS)

Practical

Patient Care Assignments

Writing of Nursing care plan for assigned patients

Prepare clinical rotation plan

Prepare clinical teaching plan for students

Perform clinical evaluation of students/staff

Unit management plan-Designing

Supervision techniques- Writing unit report, Performance appraisal, Guidance,

Staff assignment, Material management

PRACTICALS 40MARKS

CODE OF PROFESSIONAL CONDUCT

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INTRODUCTION

The Code of Professional Conduct is designed and set out as guidance for the clinical practitioner within the relationship that exists with every patient receiving health care.

Essential to that relationship is the patient's trust in the practitioner. This trust hangs upon the patient's assurance of being the practitioner's first concern during their clinical encounter, and upon the patient's confidence that the care received will be competent, whether in diagnosis, therapy or counseling.

STANDARD OF PRACTICE AND CARE

Patients are entitled to the highest standard of practice and care. The essential elements of this are professional competence, good relationships with patients and colleagues and observance of professional ethical obligations.

In providing care you must therefore:

- Recognize the limits of your professional competence.
- Be willing to consult colleagues
- Keep clear, accurate and contemporaneous patient records which report the relevant findings
- Keep colleagues informed.
- Pay due regard to the efficacy and the prudent use of resources.
- Be competent, truthful, and accurate, when reporting on investigations.
- Be competent when giving or arranging treatment.

Patient's rights

- Listen to patients and respect their views.
- Treat patients politely and considerately.
- Respect patients' privacy and dignity.
- Give information to patients in a way they can understand.
- Respect the right of patients to be fully involved in decisions about their care.
- Respect the right of patients to refuse treatment or to take part in teaching or research, reporting the refusal to the person requesting the procedure.
- Respond to complaints promptly and constructively.
- Ensure that your views about a patient's life style, culture, beliefs, race, colour, sex, sexuality, age, social status, or perceived economic worth, do not prejudice the service you give.

CONFIDENTIALITY

Patients have a right to expect that you will not pass on any personal in the course of your professional duties, unless they agree

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